

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

COLLINS, VELLA & CASELLO, LLC
2317 Highway 34, Suite 1A
Manasquan, NJ 08736
(732)751-1766
Joseph Casello, Esq.
Attorneys for the Debtor

In Re:

Carolyn E. Brown

Case No.: 20-20921

Chapter: 13

Adv. No.: _____

Hearing Date: _____

Judge: Kaplan

CERTIFICATION OF SERVICE

1. I, Courtney Parker :

☐ represent _____ in this matter.

☒ am the secretary/paralegal for Joseph M. Casello, who represents
_____ the Debtor _____ in this matter.

☐ am the _____ in this case and am representing myself.

2. On October 29, 2020, I sent a copy of the following pleadings and/or documents to the parties listed in the chart below.

1. Order Respecting Amendment to Schedule D, E/F, F, G, H or List of Creditors;
2. Amendment to Schedule E/F
3. Notice of Commencement of Case;
4. Notice of Hearing on Confirmation of Plan 5. Chapter 13 Plan

3. I certify under penalty of perjury that the above documents were sent using the mode of service ⁺ indicated.

Date:

10/29/2020

Signature

Courtney Parker

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Alta Mar Condominium Association 2825 Palm Beach Blvd Fort Myers, FL 33916	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Browns Heating & Cooling, Inc. 88 Birch Avenue Little Silver, NJ 07739		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Lexus Financial Services P.O. Box 9490 Cedar Rapids, IA 52409-9490	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Pioneer Credit Recovery PO Box 1018 Moorestown, NJ 08057	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
State of New Jersey Division of Taxation P.O. Box 245 Trenton, NJ 08695-0245	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)